

東彰院

Sinake Free Live Free THIRD EDITION

Introduction

This pamphlet provides practical information to smokers who are preparing to quit smoking. Quitters are advised to read through this pamphlet before commencing their quitting plan. Besides, it serves as an aid to health care professionals such as doctors, nurses, clinical psychologists and counsellors to interact with people who want to seek help from our smoking cessation service.

If service users have any queries or need professional help, they may call our hotline: **2332 8977**

Content

This pamphlet is based on the expertise of health care professionals such as doctors, nurses, clinical psychologists, social workers who are trained in smoking cessation. In this edition, many sections have been revised and are in the format of Q & A to make it simple and easily understand.

It has covered the following areas:

Why quit? What is the harm of smoking?

How to motivate yourself to quit smoking?

How to prepare yourself to quit smoking?

What is the use of counselling in smoking cessation?

Neurophysiology of nicotine addiction and body reactions on quitting smoking

Role of pharmacotherapy

Relapse prevention

After care of smoking cessation

Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation Service introduction:

Our smoking cessation service provides mainly counselling supplemented with medications to help smokers to quit. Doctors, nurses or counselors will give initial assessment on personal health, personal habit and smoking related social conditions. Then, he or she formulates an individualized treatment plan according to nicotine dependence level and health condition.

Counselling regarding concept of nicotine addiction, motivational enhancement, identifying high risk situations and ways of coping stress and relapse prevention will be given in the course of treatment.

The usual course of medical treatment is about two to three months, in which there are at least four face to face interviews with counsellors. The first interview may take about one hour in order to understand the quitters' background and to tailor an individualized plan for smoking cessation. Medical consultation will be provided if needed.



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Why quit? What is the harm of smoking?

The harmful effects of smoking

Smoking is bad for your health. Each puff of smoke contains numerous harmful chemicals. Once it enters your body, it will impair your immune system.

In the long run, it can cause various kinds of cancers, stroke and heart attacks. In addition, it can also cause Chronic Obstructive Airway Disease, which presents as chronic cough and shortness of breath on moderate or mild exertion. Other commonly overlooked diseases related to smoking include osteoporosis, cognitive decline leading to dementia, macular degeneration leading to blindness, depression, autoimmune disease, breast cancer, acid reflux and erectile dysfunction.

Second hand smoking

Second hand smoking is harmful to pregnant women, infants, children and adults. It can affect lung function which leads to heart disease and cancers. Brain growth and development of baby can also be adversely affected by smoking parents.

Sudden Infant Death Syndrome may occur in infants of smoking mothers who smoke during pregnancy. Children with respiratory problem are more prone to have exacerbations.

Third hand smoking

"Third hand smoking" is an often neglected condition. Third hand smoking means that people come into contact with tobacco smoke, and its remaining chemical substances staying in clothes, walls, furniture, carpet, cushions and even hair and skin. These substances may stay on for weeks or months even if there is adequate ventilation. Toddlers playing and crawling around are more likely to contact these residual chemicals staying in the furniture, carpets and clothing. This third hand smoking can cause harm to the neurological and respiratory system of these babies.

How does smoking affect women's health?

Women smokers also suffer from the serious consequences of smoking in men like cancers and cardiovascular diseases. Women smokers who use oral contraceptives will have increased the risk of forming blood clots; hence, increased risk of heart attacks and strokes.

Smoking during pregnancy is associated with preterm delivery, low birthweight, premature rupture of membranes and placenta previa. They also have a higher chance of losing their baby before it is born. In addition, studies show that there is an increased risk of SIDS (Sudden Infant Death Syndrome) in babies born to women smokers. A recent study indicates that smoking during pregnancy can increase the risk of a baby developing schizophrenia later in life.

Women who smoke and delay childbirth are putting themselves at a substantially greater risk of future infertility than nonsmokers. They may also suffer from early menopause and menstrual problem such as abnormal bleeding and absence of periods.

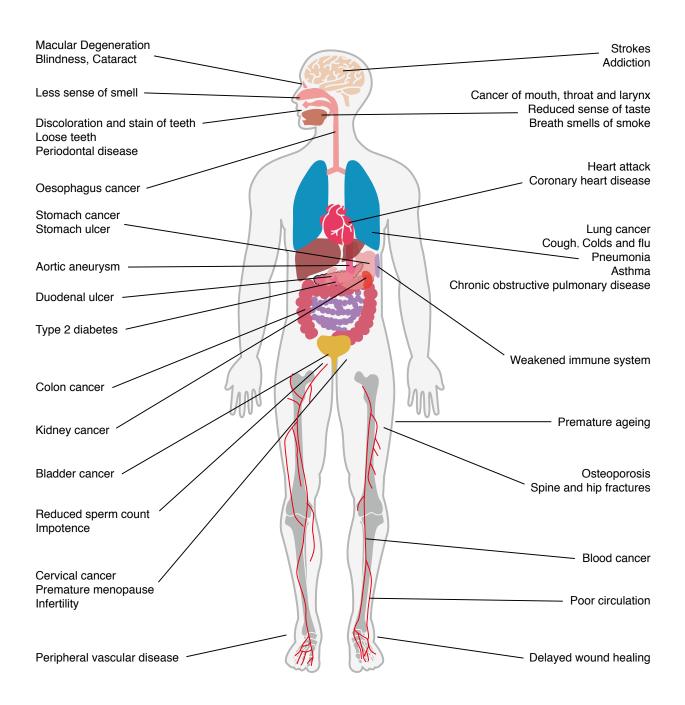
Nicotine blocks brain estrogen synthase which disturbs menstrual cycle. Female smokers are more likely to have premature menopause than their non-smoking counterpart. Smoking also causes a significant increase in the risk of bone loss and osteoporosis and may lead to the development of cervical cancer, breast cancer and vulvar cancer.

Key message:

Smoking not only harms yourself but also harms your family.



The diagram below shows that smoking can cause many diseases and bodily damages. In fact smoking can affect many organs in the body. Therefore smokers should guit smoking as soon as possible to avoid further damage to their body.



Reference:

- 1) Hong Kong Council on Smoking and Health http://www.smokefree.hk/tc/content/web.do?page=ThirdhandSmoking
- 2) Department of Health : http://www.hkmenshealth.com/b5/lifestyle/smoke.aspx
- 3) U.S. Department of Health and Human Services. A Report of the Surgeon General: How Tobacco Smoke Causes Disease: What It
- Means to You. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010.
- Niemelä S, et al "Prenatal nicotine exposure and risk of schizophrenia among offspring in a national birth cohort" Am J Psychiatry 2016; DOI: 10.1176/appi.ajp.2016.15060800.
- 5) http://www.surgeongeneral.gov/library/reports/50-years-of-progress/full-report.pdf

What harmful substances are contained in tobacco?

Carcinogenic substances in Tobacco



Formaldehyde Preservative



Additive to gasoline



Polonium Satellite material



Vinylchloride Water pipe material

Foxic chemicals (carcinogenic; toxic to the brain and kidney



Chrome Stainless steel



Arsenic Insecticide



Battery



Cadium Colour dye

Toxic gases

n affect your heart and lung functions; cause chemical burn to your throat g and eyes; lead to coma in severe case)



Carbon monoxide Car exhaust

Fig. 1



Hydrogen cyanide Chemical weapon



Ammonia Glass cleaner



Butane Lighter



Butane Paint thinner

Tobacco smoke contains **7,000 chemical substances.** A few hundred of them are poisonous. **About 70 of them are carcinogenic.** Figure 1 shows some of these chemical substances. Second hand smoking also contains similar substances which are equally harmful.

Reference : http://www.cdc.gov/tobacco/data_statistics/sgr/2010/pdfs/key-findings.pdf

What are the immediate and long term benefits of quitting smoking?

It is never too late to stop smoking. Give up smoking for good can let you see the benefits almost immediately. After stopping smoking, some of your body functions will resume normal:



After quitting for 20 minutes, blood pressure, pulse will be back to the level before the last cigarette After quitting for 8 hours, carbon monoxide level in the blood will drop back to almost normal After quitting for 48 hours, your sense of taste and smell will be back After quitting for 2 to 12 weeks, circulatory system and lung function will improve After quitting for 1 to 9 months, you will cough less and your exercise capacity will be better After quitting for 1 year, your risk of getting coronary disease will be reduced by 50% After quitting for 5 years, the risk of lung cancer, oral cancer and esophageal cancer is reduced by 50% After quitting for 10 years, the risk of dying from lung cancer is similar to non-smokers After quitting for 15 years, the risk of coronary heart disease is similar to non smokers

The following are some of the remarks shared by smokers who had quitted smoking in our centre:

Before quitting, I get exhausted after 10 minutes of playing soccer; now I can play 40 minutes!

After quitting, I hug my baby more than ever because I have no more tobacco smell.

The nasal allergy of my son is better. It saves me a lot of medical expenses.

I feel much refreshing, energetic. My skin is even better.

Reference:

American Cancer Society Centers for Disease Control and Prevention. https://www.cancer.org/about-us.html

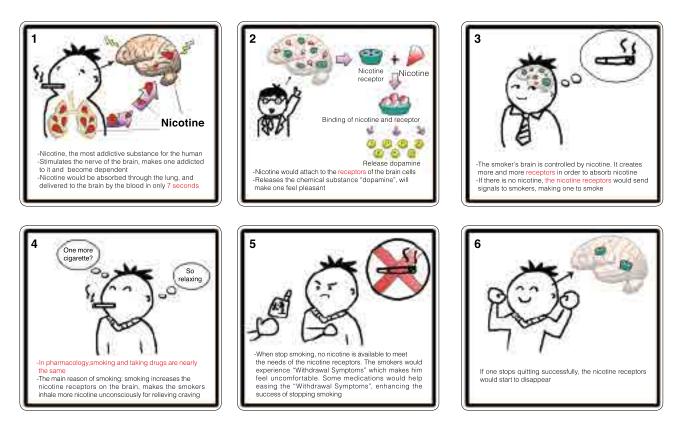
Key message:

Quitting at any age and at any time is beneficial. It is never too late to quit, but the sooner the better. Quitting gives your body a chance to heal the damage caused by smoking.

Why quitting smoking is so hard?

Tobacco contains an addictive substance called nicotine. It is one of the most addictive substances, and it makes people difficult to stop smoking. Inhalation is the quickest way for this substance to reach the brain. When you smoke tobacco, high level of nicotine will reach the brain in about 7 seconds, stimulating feelings of pleasure and desire for more tobacco. Nicotine will bind to nicotine receptors in the brain to release many chemical substances such as dopamine which give a pleasurable effect. As smoking continues, the nicotine receptors will increase in number; hence, you tend to smoke more. When these receptors are empty, they make you feel uncomfortable and increase your urge to smoke. Eventually you will become dependent on nicotine and hence addiction. (see Fig. 2)







In the process of quitting, you will need some aids to deal with these discomfort while having no tobacco (withdrawal symptoms). Over time the number of nicotine receptors in the brain diminishes gradually because of lack of strong stimulation from tobacco smoke. Finally the urge to smoke will disappear. However, some remaining receptors have memories. When some quitters happened to contact nicotine product again, these receptors will be excited very quickly and become very much in need of nicotine in a short time. The urge for smoking will be re-ignited and tobacco addiction will come back again. Therefore, "taking even one cigarette after quitting can be a dangerous thought" if someone attempts to smoke even one cigarette after quitting. (See Fig. 3).

7 UNDERSTAND NICOTINE ADDICTION

Key message:

Two important factors for success of quit smoking are i) to stop buying tobacco or decline the offer of cigarettes and ii) to avoid smoking environment during quitting. In essence, avoid tobacco altogether. The smell of tobacco and/or the sight of a cigarette are often triggers to smoke again. 'It is only one cigarette' should be wiped out from your mind. NEVER TAKE ANOTHER PUFF.

Figure 3 showed how one puff of cigarette can fill up almost all nicotine receptors in a short time. Two important factors for success of quit smoking are i)to stop buying tobacco or decline the offer of cigarettes, and ii) to avoid smoking environment. However, many smokers tend to rely on tobacco to cope with stresses and emotions. For some people, the more cigarettes they smoke, the more they need to smoke to feel good. In addition to **physical dependence**, there is also **psychological dependence**. Repeating the long term link between tobacco and the pleasurable effect of smoking form a 'reward pathway' in the memory. The smell of tobacco and/or the sight of a cigarette are often triggers to smoke again.

Remember that it takes time, patience and repeated practice to quit smoking. It may take more than one trial to quit for good. You can learn from each quit attempt and should not give up.



Fig. 3

As nicotine from a cigarettes attaches to nicotine receptors in the brain, it displaces a radiolabeled tracer resulting in low level of uptake of tracer in blue colour, meaning a high level nicotine bind to the receptors. Within ten seconds of the first puff, up to 50% of our brain's acetylcholine receptors would become occupied by nicotine, or prior to finishing that first cigarette nicotine would saturate almost all of them.

Reference:

Brody AL, Mandelkern MA, et al. Cigarette Smoking Saturates Brain alpha 4 beta 2 Nicotinic Acetylcholine Receptors. Arch Gen Psychiatry. 2006; 63: 905-917

How dependent are you on tobacco?

The following is a set of questionnaire to test your nicotine dependence: The Fagerstrom Tolerance Questionnaire (Fagerstrom, 1978)

| Questions | Choices | Score |
|--|---|------------------|
| 1. How soon after your wake up do you smoke your first cigarette? | 5 min or less 6 to 30 min 31 to 60 min 60 min or above | 3 2 1 0 |
| 2. Do you find it difficult to refrain from smoking in places where it is forbidden? | o yes ○ no | 1 0 |
| 3. Which cigarette would you hate most to give up? | The first one in the morning other | 1 0 |
| 4. Do you smoke more frequently during the first hours after waking up than the rest of the day? | o yes ○ no | 1 0 |
| 5. Do you smoke if you are so ill that you are in bed most of the day? | o yes ○ no | 1 0 |
| 6. How many cigarettes per day do you smoke? | 31 pieces or above 21-30 pieces 11-20 pieces 10 pieces or less | 3 2 1 0 |
| | Total score | |

Analysis of result:

| Total score : | 0-3 | Nicotine dependence : | mild |
|---------------|------|-----------------------|----------|
| Total score : | 4-5 | Nicotine dependence : | moderate |
| Total score : | 6-10 | Nicotine dependence : | severe |



What are nicotine withdrawal symptoms?

When a regular smoker suddenly stops smoking, he/she may experience some discomforts due to bodily response to no more nicotine. These discomforts are called Withdrawal Symptoms. The following showed a list of some common withdrawal symptoms. These symptoms last for several weeks and become less intense and less frequent over time.

- Craving for tobacco
- Depression
- Hunger and increased appetite
- Tiredness
- Headache
- Lack of concentration
- Anxiety
- Irritable and anger
- Dry mouth
- Trouble sleeping



Reference :

Conklin C. A., Perkins K. A., Levine M. D. (2008) Cognitive-Behavioral Therapy for Smoking Cessation: A Practical Guidebook to the Most Effective Treatments (Practical Clinical Guidebooks) New York : Routledge.

Key message:

Withdrawal symptoms only last for several weeks, and there are many coping methods.

What other things would happen to your body during smoking cessation?

Constipation:

Nicotine is a neurological stimulant, and it can increase the gut motility. When stop smoking, the gut motility decreases due to lack of stimulation of nicotine, and this requires an adjustment period to resume normal. You can increase the fiber intake with extra fruit and vegetable, drink lots of water (eight glasses per day) and try to do more exercise to help increasing the gut motility. Fortunately, constipation caused by withdrawing from cigarettes doesn't last very long. After a few weeks without nicotine, the body will adjust to the change and establish a new normal routine.

Coughing and phlegm:

In the initial phase of smoking cessation, there might be slight increase in cough and phlegm for some people. That is not abnormal. Smoking destroys the cilia in the respiratory system. Cilia are small hairs that line in the breathing passages that are meant to keep harmful particles from entering the lungs. After stop smoking, these cilia start working again. The coughing is a sign that your body is beginning to clean itself and rid the breathing passages of phlegm buildups. This phenomenon is transient and can be helped by drinking more water.

Dizziness:

In the first one or two days of smoking cessation, you might feel a bit dizzy because the carbon monoxide dramatically decreases and more oxygen will be taken up by the blood to the brain which makes you feel dizzy. The brain has to adjust to this change, and the symptom will go away soon afterwards.

Headache:

Headaches are common in the first few days after quitting tobacco. When nicotine and carbon monoxide are withdrawn from the system, there is a sudden rush of oxygen released into the blood. It takes the body a few days to adjust to the new level of available oxygen.

Sleep disturbances:

It is a common side effect of nicotine withdrawal. Sleep can get pretty disruptive in the first few days. Some people will get very little sleep, waking up every hour or not sleeping at all yet not feel tired. Others can sleep 20 hours a day and be exhausted during their waking hours. However, do not panic by the amount of sleep you get for the first few days. It is not your normal amount of sleep as an ex-smoker; it is your normal amount of sleep while in drug withdrawal. They will not last long. Anyone experiencing such problems the first week or two after quitting probably is likely just having adjustment issues. You can avoid stimulants (e.g. coffee, caffeinated drinks). Take a walk several hours before sleep, take a warm bath in preparation to sleep and drink a glass of warm milk before bed. Sleep will eventually settle in to a normal pattern for you as an ex-smoker after about two to three weeks.

Weight gain:

After quitting smoking, the taste and appetite will improve; hence, some people will gain weight. You have to do some exercise and restrict your calorie intake, especially fatty meals.

What is the use of medications for smoking cessation?

There is a myth commonly found in smokers that medication for smoking cessation will help smokers dislike smoking or even become uncomfortable on smoking. In general, this is not true. The medication can alleviate your discomfort by reducing the withdrawal symptoms during smoking cessation, and help to lessen craving for tobacco. However, it cannot make you hate or dislike smoking.

There are different types of medications available in the market. Medications containing low dose nicotine are called Nicotine Replacement Therapy. Non-nicotine medications also can help reduce withdrawal symptoms and urges to smoke by a different mechanism. Please note that all these medications aim to alleviate the Withdrawal Symptoms. According to 2013 Cochrane Review, both kinds of medications can increase quit rate. Psychological dependence and craving should be dealt separately with counselling and modification of behaviours associated with smoking. Psychological dependence occurs when you smoke and associate certain facets of your life – such as drinking, driving, partying, watching television or playing mahjong – with smoking. Studies have shown that pharmacotherapy together with counselling yield better quit result then using medications alone.

Key message:

Smoking cessation medications only help to relieve withdrawal symptoms. Psychological dependence and craving should be dealt separately with counselling and behaviour modification.

Nicotine Replacement Therapy

Nicotine Replacement Therapy is a safe and effective means to help quit smoking. The medications contain pure nicotine similar to tobacco products but provide much lesser nicotine with less rapid absorption. Therefore, it can no longer over-stimulate your brain but are adequate enough to reduce withdrawal symptoms. After an initial course of treatment, the nicotine receptors would decrease and the "addiction centre" of the brain becomes less addictive to tobacco. The dosage of nicotine replacement can then be tapered over a period of time and finally is taken off. Forms of Nicotine Replacement Therapy include patch, gum, and lozenges.

Most of these products have been available more than 20 years and are proven to be safe in general. Due to lower dosage of nicotine and less rapid absorption than smoking cigarette, they are not addictive when instructions to use are followed. The use of Nicotine Replacement Therapy increases the success rate of quit smoking by 50 to 70%. You may seek advice from doctors or community pharmacists on using such products.

Important points to note:

- Patients with unstable angina, serious cardiac arrhythmia or had recent myocardial infarct, recent coronary angioplasty or a recent stroke are not advised to use these products. For other contraindications, please seek professional advice.
- Although nicotine in these products is much less than a cigarette, pregnant women or women on breast feeding should consider counselling on quit smoking without medication first to help them to quit.
- Stop using tobacco products while using Nicotine Replacement Therapy.
- Follow your health care provider's or counsellor's instructions.
- Do not exceed the recommended dosage by your health care provider or counsellor.

Key message:

Nicotine replacement therapy is safe and effective if properly used.

Nicotine gum

Nicotine gum is a form of Nicotine Replacement Therapy that releases nicotine when being chewed. Nicotine will be delivered through the mucosal lining of your mouth into your brain. Unlike the use of ordinary gum, it should not be chewed continuously or nicotine is swallowed rather than absorbed through the mucosal lining of the mouth. Stop using tobacco when you are use nicotine gums. (See method of use below)



Course of treatment:

Method of use:

The chewing method of nicotine gum differs from ordinary gum, and it should be properly used before it can be effective. One of the most common mistakes is that smokers tend to chew these gum like ordinary gum. One should use "chew and park" method to allow time for the buccal mucosa to absorb nicotine. Place the nicotine gum in the mouth

Important points to note:

- 2. Side effects include mouth ulcer, sore throat, hiccups, indigestion and heart burn.
- Acidic beverages, coffee and fruit juice can affect nicotine absorption. Therefore, avoid such drinks 15 minutes before using the gum.
 Avoid smoking whilst using gum.



Nicotine lozenges

The nicotine lozenges are a form of Nicotine Replacement Therapy that delivers nicotine through the mucosal lining of mouth into your brain. Stop using tobacco while you use nicotine lozenges. It should be used properly in order to be effective (See below).

Course of treatment:

The dosage and frequency of use depends on the daily tobacco consumption and nicotine dependence. The duration of treatment is about 8-12 weeks.

Method of use:

In order to be effective, the use of nicotine lozenges should be used properly. A lozenge is placed in the mouth between the gum and the cheek and sucked slowly until there is a strong taste of nicotine in the mouth. At this point stop sucking until the taste fades, resting the lozenge against the cheek. Continue to suck again when you cannot taste any nicotine in the mouth and suck the lozenge until it has completely dissolved. The lozenge should occasionally be moved from side



to side in the mouth and the whole process should take about 20 - 30 minutes. The lozenges should be sucked slowly and gently, and not chewed or swallowed, as this may cause heartburn or indigestion.

Point to note:

- Avoid eating or using acidic beverages or drinks 15 minutes before using lozenges.
- Use one lozenge at a time.
- Avoid smoking whilst using lozenges.
- Common side effects include sore throat, heart burn and hiccups.



Nicotine patch

The nicotine patch is a form of Nicotine Replacement Therapy that delivers a steady dose of nicotine through your skin into your blood stream. The patches come with various dosages and are available without a prescription. You should ask your healthcare provider or smoking cessation counsellor which dosage would suit you most. Do not use tobacco when you use nicotine patch.

Course of treatment

The dosage of nicotine patch depends on the daily tobacco consumption and nicotine dependence. The duration of treatment is about 8-12 weeks.

Method of use:

- 1. Apply a new patch each day to non-hairy sites of your body including arms, back, and abdomen. Do not use lotion or soap containing moisturizers on the patch site area.
- 2. Rotate the patch sites every day.
- 3.16 hours patch should be removed before sleep at night.
- 4. If the patch comes off, apply a new patch. If you have problems keeping the patch attached, apply surgical tape in a crisscrossed pattern over the patch.

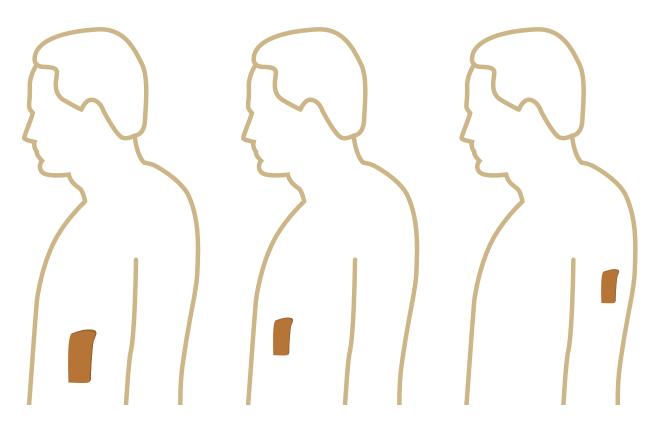
Points to note:

Nicotine patch can cause local skin allergy. Local erythema is common without severe itchiness after applying the patch. If this disappears in one or two days, you may continue to use by applying it to different sites every day. If the redness and itchiness are very severe, speak to your doctor or counsellor. Wash hands after applying the patch.

Do not smoking whilst using the patch.



Need to change the location of the patch every day.



Non-nicotine Replacement Therapy

These are oral medications and have more side effects. They will be prescribed by doctors after medical assessment. You should ask your doctor's opinion on the use of these drugs.

(1) Varenicline

Varenicline (Champix) is a non-nicotine, non-addictive medication that may help you stop using tobacco by relieving your withdrawal symptoms. This medication

acts by blocking the nicotine receptor and by increasing the level of certain brain chemicals which may ease nicotine withdrawal symptoms. It is available by prescription only. The length of treatment usually lasts for 12 weeks.



Points to note:

- 1. The following conditions are not recommended to use Varenicline :
 - End stage renal disease
 - Less than age 18
 - Pregnant and breastfeeding mother
- 2. Serious psychiatric symptoms such as changes in behaviour, agitation, depression and thoughts of suicide might occur in people using Varenicline
- 3. Severe allergic reaction, which is rare, includes severe blistering skin reactions, respiratory difficulty which needs emergency medical attention.

(2) Bupropion SR

It is a non-nicotine, non-addictive medication that can help you stop smoking. It appears to increase the level of certain brain chemicals which may relieve nicotine withdrawal symptoms and reduce tobacco cravings. It is contraindicated in certain medical conditions such as bipolar depression, history of severe head injuries, stroke, seizures, anorexia and bulimia, etc. It is a prescription drug and should be used under medical supervision because it can cause serious psychiatric symptoms and raised blood pressure.



Combined therapy

For those with heavy cigarettes consumption, a gradual reduction in cigarettes may be tried at the beginning. Then a combination with a long action nicotine replacement (patch) with a short acting replacement (lozenge or gum) may be used to help to reduce withdrawal symptoms and control tobacco craving.

What is the role of e-cigarette in smoking cessation?

There has been serious doubt about the safety of e-cigarette and its effectiveness to help smokers to quit. It is not suitable to use e-cigarettes to quit smoking.

World Health Organization (WHO) has stated that there is insufficient evidence regarding e-cigarettes can be an effective agent to help smokers to quit. Besides, many people smoke both cigarettes and e-cigarettes at the same time when they try on e-cigarettes. Researches also revealed that e-cigarettes contain toxic chemical substances like propylene glycol, glycerin and carcinogens such as formaldehyde and acetaldehyde which can bring health risks to human. E-cigarette vapor produces tiny particles of comparable size (184-270 nm) to those contained in cigarette smoke. The users can suck deep into their lungs, potentially causing or worsening respiratory diseases.

Smokers who want to quit smoking should seek proper evidence-based method to quit.



Reference:

Cahill K, Steven S, Perera R, Lancaster T. Pharmacological interventions for smoking cessation: An overview and network metaanalysis. Cochrane Database of Systematic Reviews. 2013, Issue 5. Art No: CD009329

Key message:

E-cigarette is not recommended for quitting.

15 MEDICATION FOR SMOKING CESSATION

How to prepare yourself to quit smoking?

Smoking is a habit and is an addictive behaviour. It may be a long process to break this habit. You should psychologically be prepared to do so. Your motivation and commitment are very important. Before you take any action, try to do the following things:

- 1. Try to think of under what situations you will smoke
- 2. Think of the reasons why you want to quit
- 3. List out the benefits and harms of continued smoking
- 4. Get ready to seek help from professional, family and friends
- 5. Set a quit date when you are ready, and you are not overly stressed or unduly depressed. If you have any emotional issues, please seek medical attention first. A good timing is a key to success
- 6. On the guit date, dispose of all tobacco and throw away all ashtrays and lighters
- 7. Cut down your alcohol intake if you are a regular drinker



Key message:

Be prepared before quit smoking. During quitting, dispose all tobacco and stop buying tobacco.

How to motivate yourself to quit smoking?

Please answer the following questions so as to increase your motivation:



You should try to answer the above questions to motivate your quit attempt

| 1 | | | |
|----|------|--|--|
| 2. | | | |
| 3. | | | |

Make a copy of this and post it somewhere you can easily see it.

Also answer the following:

If you wish to continue smoking, what would be the worse consequences?

If you have succeeded stop using tobacco, how would your life become?

If you wish to stop smoking, what will be your next step to do?

How strong your decision to quit is an important factor for successful quitting. The followings are two important scales which help to measure your motivation or decision to quit. Please circle the number from 0 to 10.

| | least | t | | | | | | | | | most |
|---|------------------------------|--------|--------|-----------|--------|--------|-----------|-------|-----------|---|------------|
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| nportance | | | | | | | | | | | |
| , <u>, , , , , , , , , , , , , , , , , , </u> | | | | ver triar | | | | | | | |
| low confidence | that yo | ou are | - | | | sing t | obac | co nc | w? | | most |
| How confidence | that yo | ou are | - | | | | obac 6 | co no | w? | 9 | most 10 |
| f your rating is 'x'; try to How confidence 0 means least, 10 mea Confidence | that yo ns most) least | ou are | e able | e to st | top us | | | | | 9 | |

What is the use of counselling in smoking cessation?

Many people believe that smoking is a personal matter and think that they can quit smoking on their own or buy smoking cessation medication themselves. Although there might be a handful of successful cases, we have come across many failure cases; either they do not use the medication correctly, use the wrong dosage, terminate the treatment prematurely or relapse very soon. They have played down the importance of counselling.

Our counselling includes helping smokers know the concept of nicotine addiction; understand and deal with their barriers of quitting smoking; understand how to medicate correctly. We apply Motivational Interviewing technique to motivate their intrinsic factors to quit. We use behavioural modification to teach them cope with stress and anxiety in order to prevent lapses and relapses.

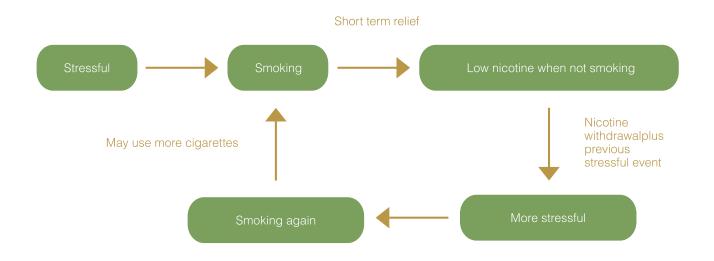


Reference :

Lundahl B, Burke BL. The effectiveness and applicability of motivational interviewing: a practice-friendly review of four meta-analyses. J Clinic Psychol. 2009; 65: 1232-1245

Can smoking reduce your stress and help you concentrate?

There is a misconception that smoking can reduce stress. In general, smokers suffer from more stress than non-smokers. When under stress, nicotine can help to reduce stress in short term. Smokers then learn to smoke to reduce stress. When the nicotine level drops, they get more anxious; and they will begin smoking again or smoke even more. On the contrary, studies have shown that quitting smoking can reduce anxiety and depression in the long term. Another misconception is that smoking can help people concentrate. Although nicotine in tobacco can help you concentrate in short term. However, once you stop smoking, nicotine withdrawal can make you fail to concentrate; hence, you are 'trained' to use cigarette to help you concentrate during this time. In fact, the toxic substances of tobacco cause the blood to carry less oxygen to the brain; hence, they are less able to concentrate.



References:

Allen Carr. The Easy Way to Stop Smoking. Gobooks & Sitak Group

Parrott AC. Does cigarette smoking cause stress? American Psychologist, Vol 54(10), Oct 1999, 817-820.

Taylor. G et al. Change in mental health after smoking cessation: systematic review and meta-analysis. BMJ 2014;348:g1151 doi: 10.1136

How to exercise emotional control (1): Knowing your emotion

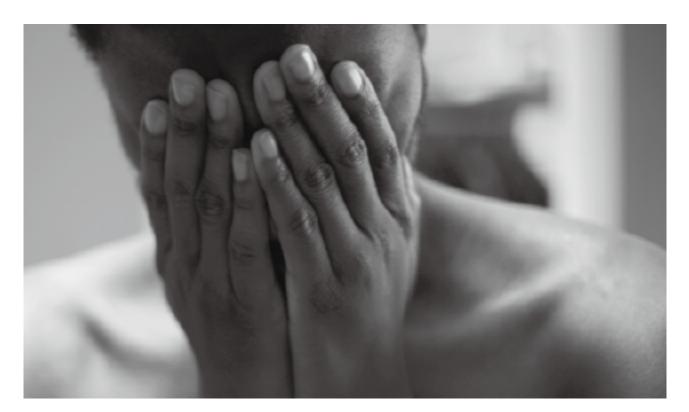
Many smokers rely on smoking to ease their negative emotion when they feel sad, anxious, angry or have a lot of pressure. Common manifestations of negative emotion:

| Emotion | Thoughts | Body reaction | Behaviour |
|---------|--|---|---|
| Anger | Feel being treated unfairly Being not respected Being used | Redness of face Increased breathing Increased heart rate Excited | Loss of temper Fighting Throw at things Smoking |
| Anxiety | Feel that the worse will happen Feel being unable to handle Feel being in danger | Anxious Sweating Hand tremor Increased breathing Increased heart rate Lack of concentration Feeling hot | • Avoidance • Smoking |
| Sadness | Worthlessness Hopelessness Sense of losses | Insomnia Change in appetite Memory loss and lack of concentration Fatigue | Recurrent negative thoughts Avoid social activities Lack of energy Smoking |

Please check the following situations which cause you to smoke (you can choose more than one)

Please note that :

- 1. Both positive and negative emotions are normal reaction to various situations in our daily life.
- 2. Both emotions and smoking urges pass away with time like waves. If we can manage our negative emotion effectively, we may change it to positive energy. On the contrary, if we manage it with a wrong way, it would lead to mood problem.



How to exercise emotional control (2): Learn to manage your emotion

Watch out for the triggers that cause negative emotions to occur and learn the strategies that you need to cope. It's time to stop living your life by looking backward, let go of the past by looking around you and being grateful for what is in your life. You can appreciate the good things you have. Some people find doing a 'let go' ritual may help. For example, trying to write a letter—to yourself or to someone else who hurt you. Write down all your thoughts, feelings, and any actions you want to take. Once you are done, read over the letter. Then, use a match to burn the letter and spread the ashes in the wind or flush them down to a toilet.

Negative emotion = need to smoke?

Smoking can let you feel somewhat easier but in the long run, this can only lead to avoidance of your problem. Actually, even though you choose not to smoke, this negative emotion would go away with time. **Therefore, all you need is not a cigarette but to know how to manage your emotion.**

When you are not happy, do not go for cigarettes. Think of doing something else to cool you down. Then try to do the following things to help you deal with such negative emotion.

Improper emotional management

Unhealthy behaviour

Use of alcohol or drugs Overwork Avoid contact with family or friends Angry or use of violence Overreacting

Negative thoughts

Feeling useless Feeling hopeless Blaming that it is the faults of family members or own self

Proper ways of emotional management

Self encouragement

Relaxation exercise / deep breathing / yoga / Meditation Regular exercise Accept yourself Adjust your standard and compromise

Self encouragement

Bad things will soon go away I have the option to feel happy or not I have already coped with negative emotion previously. I can also do it this time. More positive self-talk

Arrange activities that make you happy

Eat a balanced diet Build a supportive network Have a good rest on holiday Do other stress relieving activities or do something you like Develop a hobby

Key message:

When you are feeling stressful and have a negative emotion, do not use tobacco. There are other options to choose.

How to do deep breathing exercise?

Key message:

Deep breathing exercise can help you relieve your tension and relax.

Deep breathing exercise can release tension, relax body and mind as well as relieve emotional problems. The following is an effective deep breathing exercise. Please follow the steps below and practice to relax.

- (1) Find a comfortable place to sit or lie down.
- (2) Loosen up your tight clothing such as neck collar, waist belt and tie.
- (3) Put your hands on the lower abdomen, close your eyes and concentrate on your breathing.
- (4) Inhale deeply and slowly through your nose, then hold your breath and count to 3 and then exhale slowly.
- (5) Note the lifting and sinking movement of hands on your abdomen.

- (6) When inhale, notice the entry of air in your body. When exhale, notice the air leaving your body.
- (7) Repeat this exercise for about 15 minutes.
- (8) When you are being distracted during this exercise, try to concentrate on the movements on the lower abdomen again.

How to manage urges to smoke?

When you stop smoking, you tend to have urges to smoke. You have three main ways to deal with urges:

- (1) Think ahead. Identity high risk situations so that you can be prepared for the urges under such circumstances.
- (2) Avoid exposure to smoking areas.
- (3) Cope with the urges. Apply coping skills to tell yourself to keep away from cigarettes.

Try to understand in what situations you have the urges to smoke. Please give a check in the box \mathbf{M} .

Emotional factors Environmental factors Life style factors □ After waking □ Pressure from work □ Smell of tobacco □ After meal □ Feeling down □ Seeing a cigarette lighter □ Drinking coffee/tea □ Accompanied by smoking □ Feeling tense friends □ Driving car □ Getting mad □ Drinking with friends □ Chatting □ Quarreling □ Seeing someone smoking □ Playing video games □ Feeling sad □ Someone offers cigarette □ Fishing □ Feeling lonely □ Playing mahjong □ Waiting(bus/friends) □ Feeling happy □ Singing karaoke □ Feeling relaxed □ Alone at home Others: □ During break from work Others:_ □ Drinking alcohol alone □ Finishing a job □ Celebrating parties □ Go to toilet □ Before sleep □ Others:

Key message:

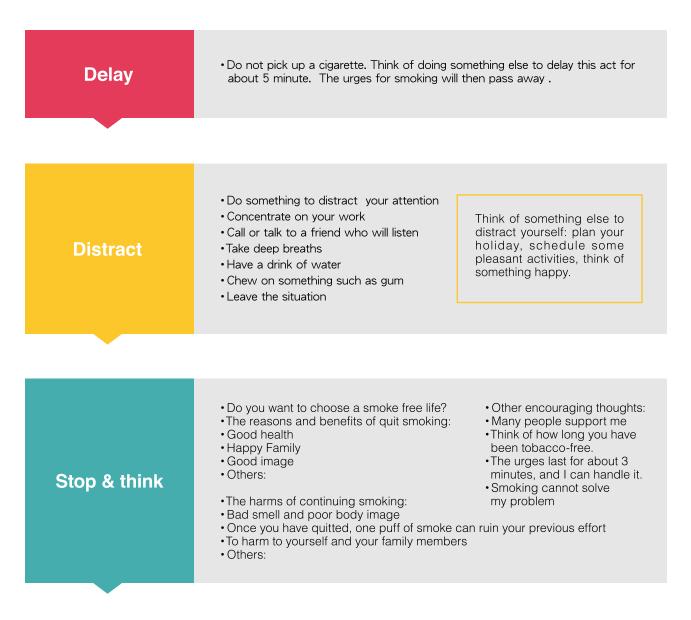
Many smokers increase their tobacco consumption subconsciously under certain situations. You should be fully aware of those situations which apply to you so as to prevent smoking relapse.

What are the ways to cope with smoking urges?

Three important tactics: delay, distract, stop & think.

It is important to note that during the early stages of quitting, urges to smoke are quite common. However, these urges last for about **three minutes** and then will go away.

When you have the urges and desires to smoke, try the following methods to avoid smoking:



Key message:

Smoking urges last only for a few minutes. Do not pick up a cigarette. Do something to delay, distract, stop and think.



How to handle lapses and relapses?

Lapse means smoking one or two cigarettes and then stops during quit smoking; Relapse means resumption of previous smoking habit and is not a single incidence. Lapse can occur to some smokers during high risk situations. Once lapse occurs, smokers should take action to prevent doing it again; otherwise, they would go to relapse.

Many smokers experience the urges to smoke again during the process of quitting, especially when they face a lot of stresses. You should be well aware of some kind of "devil thoughts" might appear during quitting. Below are some examples of 'devil's thoughts' and the ways to handle them.

Devil's thoughts causing relapse

Positive thoughts leading to quitting

I only need one cigarette!

After a hard day's work, I would like to have a cigarette.

My dependence to tobacco is very strong. It is hard to maintain abstinence.

I have already lapsed one cigarette, so why not complete the whole packet!

This would waste your previous effort to stop smoking. The nicotine receptors in your brain have memories. Even though one cigarette will revive your nicotine addiction, and you will resume your smoking habit very soon.

It is worth to gratify yourself after a hard day's work. There are many other ways to reward yourself. What about a nice meal, a small gift or a good movie?

The urge for smoking only lasts for about three minutes. Do something to distract this urge. Want to smoke≠must smoke.

Even though you have lapsed once, do not give up. It just likes playing soccer; losing one goal does not mean losing the game. Cheer up and keep fighting!

My positive thoughts are:

My devil's thoughts are:

| 2 | |
|----|--|
| 3 | |
| 4. | |
| 5. | |
| 6 | |



1.

Tips for handling lapses

What should I do if I take a few puffs or smoke one cigarette

· Immediate extinguish your cigarette and throw it away

- ·You should regard this as a miss and does not mean failure
- Even you feel guilty, do not give up; you should not blame yourself
- Recall the reasons for quit smoking; talk to someone who will listen
- •Tell yourself this is your last cigarette, and you will not give up. Before the revival of nicotine receptors in your brain, try to stay smoke free.
- Learn from the mistake and think why you have a lapse. When you come across the similar situations, what will you do?
- · Contact your quit smoking counselor

References:

Brandon, T. H., Collins, B.N., Juliano, L.M., & Lazev, A. B. (2000). Preventing relapse among former smokers: A comparison of minimal interventions through telephone and mail. Journal of Consulting and Clinical Psychology, 68, 103-113.

How to resist temptation?

When someone offers you a cigarette, or someone offers to light up a cigarette for you:

- 1. Reply firmly: "No, thank you. I have quitted smoking."
- 2. Change the subject, find an excuse to leave or provide an alternative counter offer
- Avoid responding with an ambiguous answer, e.g. I do not know whether I should smoke or not because I have started quit smoking.

Key message:

It is not uncommon to have lapses when quit smoking. Try to think of the reasons why you fail this time and ask yourself why you should quit smoking. Learn from this experience, so that you will not lapse again in future. Remember the "golden rule" for success: NEVER TAKE ANOTHER PUFF.



Why is it easy to have relapse in quitting?

Many smokers have experienced failure in quitting. Most people attribute to weak willpower. Actually, **nicotine dependence is an addiction problem**. Sometimes, it may not be easy to quit smoking by willpower alone.

Smoking behaviour is just the tip of an iceberg. The smoking behaviour presents on the surface, and the underlying reasons behind smoking are often ignored, e.g. work pressure, family conflict, boredom and bad mood. Many smokers rely on smoking to deal with these stressors.

Long-established relationships between smoking and specific activities or emotions can cause urges and desires to smoke. Even after your last cigarette, some situations may **trigger memories of pleasant effect of smoking**. It is necessary to recognize the situations under which you want a cigarette and plan ahead to cope with those situations. To maintain smoke free, we should develop a new healthy life style and nurture a positive attitude towards life as well as handle stresses in a different manner. This can greatly reduce the chance of relapse. After quitting successfully, many people relapse into smoking again when they get frustrated, feel depressed, feel stressful or get bored. This is because they had been repeatedly 'rewarded' by tobacco when facing such situations. The memories of such rewards remained in the brain for a long time. It is important to develop a new habit and new coping strategies to deal with these situations. Regular exercise will be one of the best ways to deal with these. Exercise can produce endorphin in the brain to give people the feeling of relaxation, less stressful and better mood. Examples include yoga, dancing, kick boxing, and meditation. One can also develop some leisure activities to balance out the life stresses, such as painting, photographing, playing music, arts and craft. In other words, one has to develop a 'new me' and modify one's own old life style in order to kick off the smoking habit.

Key message:

Even after you have stopped smoking, you have to prepare yourself from relapse by modifying your life style and ways of coping stresses. Cigarette can make you more stressful in the long run.

What is the relationship between smoking and drinking alcohol?

It has been known that drinking alcohol is an important cause of smoking relapse. The reasons are:

- Drinking alcohol is commonly a form of leisure activity for smokers
- Alcohol can impair the self control on stopping tobacco and can make people forget the reason of quit smoking
- It can weaken the motivation to stop smoking
- •The environment of alcohol drinking is conducive to smoking.
- You tend to smoke more during drinking

What are the harmful effects of alcohol?

Alcohol can cause cirrhosis of liver, shrinkage of the brain leading to diminished memory and learning capacity. It can also cause disruption of sleeping pattern, pancreatitis and heart disease. For cancers of the mouth, pharynx, larynx and oesophagus, there is a well-recognized interaction of alcohol with smoking. Besides, there is "accumulating research evidence" supporting a causal contribution of alcohol to cancer of the pancreas, prostate, and skin (melanoma).

References:

Central health education unit of Department of Health J. Connor. Alcohol consumption as a cause of cancer. Addiction. 2016. http://onlinelibrary.wiley.com/doi/10.1111/add.13477/epdf



What are the limits of alcohol intake?

According to the National Institute on Alcohol Abuse and Alcoholism (NIAAA) drinking guide:

| | Healthy male age 65 or below | Healthy female age 65 and below | Your average consumption is: |
|--------|---------------------------------|------------------------------------|------------------------------|
| Daily | No more than 4 units | No more than 3 units | Daily averageunits |
| | and | and | and |
| Weekly | No more than 14 units | No more than 7 units | Weekly averageunits |

Alcohol content of various types of drinks (in standard alcohol unit)

| Western wine | Standard unit |
|---|---------------|
| One 30 ml glass of spirit (whisky, gin, Vodka) | 1 |
| One 60 ml glass of fortified wine (Sherry, Martini, Port) | 1 |
| One 120 ml glass of table wine | 1.5 |
| One 350 ml can of beer | 1.5 |
| One 500 ml can of beer | 2 |
| Chinese wine | Standard unit |
| One 250 ml glass of double distilled rice wine | 6 |
| One 250 ml glass of treble distilled rice wine | 8 |
| One 250 ml glass of Sorghum | 12 |

The above unit quantity is just an estimated average. It may vary with different brands and alcohol concentration. Everybody would have different reactions to alcohol. Even though you drink large quantity once in a while, it can still be hazardous to your health when compared to regular drinkers.

Reminder:

- 1. Drinking rationally and limit the amount
- 2. Stop drinking altogether if possible
- 3. Avoid places where provides alcoholic beverage



How to change your habit of drinking?

During smoking cessation, you need to cut down your alcohol consumption to help you to quit. There are ways to help you limit your alcohol consumption:

- 1) Record your daily consumption of alcohol, time and place of drinking
- 2) Plan amount and time of drinking in a week and set an upper limit

3) Drink in small sips

- 4) Use non-alcoholic drinks in between alcoholic drinks e.g. water and juice
- 5) Eat something before drinking and this may reduce alcohol absorption
- 6) Avoid those situation which leads to heavy drinking
- 7) Learn to control the urges of drinking and remind yourself why you would like to change your drinking habit
- 8) When someone invites you to drink and yet you are not prepared to drink, learn to say "no" in a polite but firm way.

If you cannot control your drinking with the above methods and you think you have an alcohol problem, you can call Tung Wah Group of Hospitals "Stay Sober, Stay Free" Project hotline: 2884 9876

Key message:

While you are trying to quit smoking, you should reduce your alcohol intake.

Reference:

Central health education unit of Department of Health. Helping Patients Who Drink Too Much: A Clinical Guide: NIH Pub No. 013769 Betnerda, MD: the Institute 2005



Quit Smoking and Weight Management

After quitting tobacco, smelling and tasting will improve and your appetite will be better. Some people also eat snacks to cope with craving. Therefore, some quitters will put on weight, especially when they do not exercise. Sometimes, quitters gain about 10lbs. Therefore, it is preferable to do regular exercise, and they may need to modify dietary intake during smoking cessation.

How to control your weight?

Before weight control, you should know your body mass index (BMI) to see if you are already overweight or not.

| BMI (kg/m2) | classification | | BMI (kg/m2) | Health risks | |
|----------------|----------------|--|----------------|---|--------|
| >=30 | obese class II | | >=27.5 | | high |
| 25 – 29.9 | obese class I | | 23 – 27.4 | Coronary heart disease, hypertension, stroke, diabetes | medium |
| 23 – 24.9 | overweight | | | | |
| 18.5 – 22.9 | Ideal weight | | 18.5 – 22.9 | | low |
| <18.5 | underweight | | <18.5 | undernutrition, osteoporosis | |

WHO weight references (Asian Pacific region)

Calorie absorbed > Calorie consumed => increase in weight \uparrow

Therefore, for weight control, you have to:

1. Reduce excessive intake of calorie (healthy diet)

2. Increase your calorie consumptions (regular exercise)

References :

WHO expert consultation. (2004) Appropriate body-mass index for Asian populations and its implications for policy and intervention strategies. Lancet 363: 157-163 .

Fiore MC, Jaén CR, Baker TB, et al. Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service. May 2008.



How to control your body weight? (1): Healthy Eating

You can make reference to the New Food Pyramid (Fig. 4) and the Healthy Eating Plate (Fig.5)

New Food Pyramid

- The combined recommendation for fruit and vegetable has been increased to 5-7 servings per day.
- · Carbohydrates has been reduced to 3-5 servings per day
- · Get a balance between the daily food intake with exercises

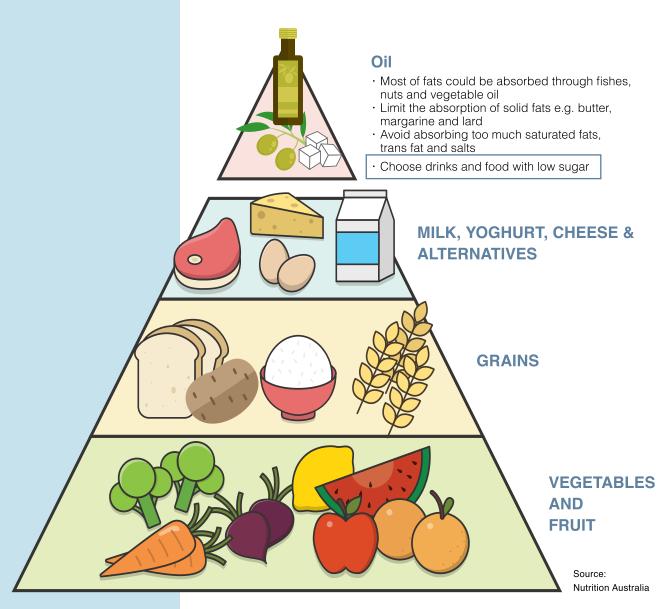


Fig. 4

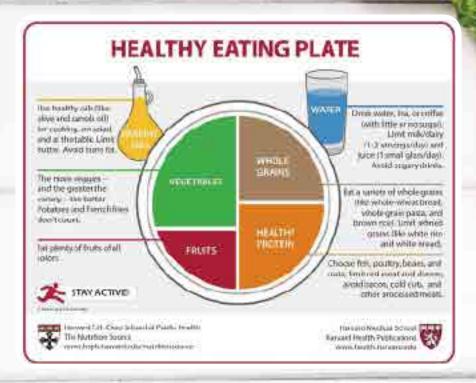


Fig. 5

Copyright © 2011, Harvard University. For more information about The Healthy Eating Plate, please see The Nutrition Source, Department of Nutrition, Harvard School of Public Health, www.thenutritionsource. org, and Harvard Health Publications, www.health.harvard.edu

Note: Healthy vegetable oils: like olive, canola, soy, corn, sunflower, peanut, and others, and avoid partially hydrogenated oils, which contain unhealthy trans fats. Remember that low-fat does not mean "healthy."

Besides, you can modify your eating habit, e.g.:

- · Eat at regular time
- Omit night snacks
 Eat slowly, take a small bite each time.
- Control the quantity of food intake and stop eating when you are about to feel full
- Avoid deep frying when you cook



References :

Department of Health, Central Health Education Unit www.thenutritionsource.org, and Harvard Health Publications.

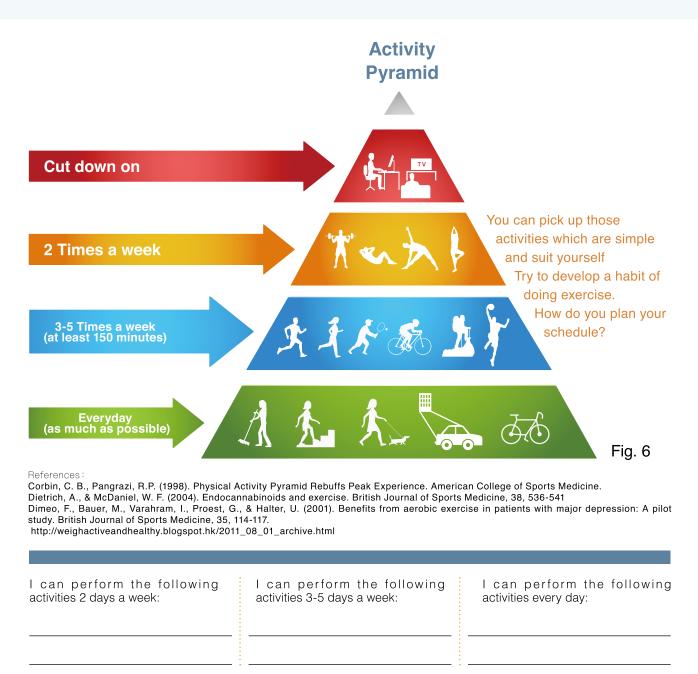
How to control your body weight (2): Regular Exercise

How can regular exercise help you quit smoking?

Regular exercise can help you improve your immune system. In addition, you can control your body weight by doing exercise. Some studies have shown that exercise can help improve your mood and relieve your stress (Diemo, 2001). Exercise has been associated with increase production of neurotransmitters like dopamine, which give us the feeling of happiness and well being (Dietrich, 2004). Exercise eases nicotine withdrawal symptoms when you first quit smoking; distracts you from thoughts of smoking and reduces your craving for tobacco. Read more:http://www.ehow.com/facts_5507276_ dopamine-exercise.html#ixzz2k28LpcXZ

Exercise pyramid

Corbin and Pangrazi had proposed an exercise pyramid in 1998 (Fig.6). Exercise activities are classified into 4 big groups: some activities can be done every day, e.g. brisk walking; some can be done at least 3 times a week, e.g. jogging; some can be done twice a week, e.g. yoga and resistance training and some should be limited, e.g. sedentary activities.



What is the relationship between smoking and sleep?

Smoking is associated with a disruption of the basic structure of sleep called

sleep architecture. This is the pattern of sleep stages that occur during the night. Smokers spent more time in light sleep and less time in deep sleep than their nonsmoking counterparts. Researchers also have shown that smoking resulting in poor quality sleep. When you do not have enough sleep, your urges to smoke might



Quiet sleeping environment: comfortable bed, suitable lighting and temperature



Avoid drinking alcohol before sleep. Although alcohol may help bring on sleep, after a few hours it acts as a stimulant; hence, decreasing the quality of sleep later in the night. increase. Therefore, a good night sleep during smoking cessation may help you reduce your craving. Besides, some smokers often complain about insomnia after quit smoking. In fact, insomnia is one of the most common withdrawal symptoms. Nicotine withdrawal is the main reason for insomnia after smoking cessation. These might last one to two weeks, and sleep will eventually settle in to a normal pattern. The following are ways to help you to have better sleep.



Do some relaxing activities before sleeping, e.g.: a warm bath, listening to light music and do relaxation exercises





Avoid caffeinated drinks before sleep



Drink a glass of warm milk. Warm milk helps us sleep probably because it helps the body produce neurotransmitters such as serotonin. Serotonin is a chemical nerve messenger that tells our bodies to shut down and sleep at night. You can add a little honey to the milk.



Meditate: try meditation in bed, laying quietly, eyes closed. Start by focusing on the muscles in your body, consciously relaxing them, section by section





If you cannot sleep after 20 minutes in bed; wake up and do some relaxing activities e.g. yoga, or get up and do something which is calming or boring until you feel sleepy. Avoid doing anything that is too stimulating or interesting, as this will wake you up even more; nor using light emitting device such as TV or mobile phone.





Avoid napping during the day; it can disturb the normal pattern of sleep and wakefulness.





Do regular exercises, but avoid exercises close to bed time



- 10
 - Establish a healthy biological clock; sleep and wake at the same time each day



How to solicit support?

You are not alone when you quit smoking. You can always seek help from others:

- 1) Tell your family and friends about your plan to stop smoking and get their support.
- 2) Understand your high risk situations so that your family and friends can help in such situations
- 3) Get to know some family members or friends who also want to quit for mutual support.
- 4) Ask for professional help such as doctors, nurses or counsellors in quit smoking.
- 5) Join our smoking cessation service and participate in relapse prevention activities such as smoke free football team
- or marathon team in our service.

References:

Phillips, BA et al. "Cigarette smoking and sleep disturbance." Arch Intern Med 1995; 155:734.

Zhang, L et al. "Cigarette smoking and nocturnal sleep architecture." Am J Epidemiol 2006; 164:529

Key message :

Nicotine withdrawal is one of the main reasons for insomnia after smoking cessation.

33 AFTER CARE ON SMOKING CESSATION

Practical information

Commonly asked questions

Sometimes I heard that people may fall ill after quit smoking, is it true?

This is not true. On the contrary, studies showed that the chance of suffering from lung cancer and coronary heart disease is reduced after quitting. It should be noted that harm of smoking may not manifest clinically for quite some time; it may appear by chance after smoking cessation.

Will the use of smoking cessation medications alone help me stop using tobacco totally?

The medications will help to relieve the withdrawal symptoms only. It is common to have psychological craving. Therefore, it is important to engage in smoking cessation counselling to deal with psychological cravings. Studies have shown that medications and counseling together greatly increase the quit rate.

Does it matter if I keep on smoking a few cigarettes while using Nicotine Replacement Therapy (NRT)?

You are strongly advised not to do so because the purpose of using NRT is to keep the nicotine level in your body at low level, so that your brain can avoid the strong stimulation from cigarettes. Then, it will allow the number of nicotine receptors to decrease over time. In the end, you will not be dependent on cigarettes. If you are still smoking, it defeats the purpose of using NRT and sometimes you may even add more nicotine to your body. Consequently, there will be no chance of successful quitting.

Will I put on weight after quit smoking?

After quitting, some people may put on weight. It is advisable to develop healthy diet and do regular exercise to control the body weight.

If I have occasionally lapses of one or two cigarettes during the quitting process, does it mean I have failed?

No, you should immediately stop using tobacco and learn from the lesson of lapse. It is not right if you think that you will continue with this cigarette now and try to quit tomorrow because this will soon lead to relapse.

Useful links

Tung Wah Smoking Cessation Hotline: 2332 8977

Tung Wah Groups Hospital Integrated Centre for Smoking Cessation http://icsc.tungwahcsd.org/index.html

Tobacco Control Office, Department of Health http://www.tco.gov.hk/

Hong Kong Council on Smoking and Health http://www.smokefree.hk

Health Zone Central Health Education Unit, Department of Health http://www.change4health.gov.hk

Mayo Clinic – Nicotine Dependence Education Program http://mayoresearch.mayo.edu/mayo/research/ndc_education/index.cfm

Quit Victoria http://www.quit.org.au/

United States of Agriculture Department-Centre for Nutrition Policy and Promotion http://www.choosemyplate.gov/foodgroups/downloads/MyPyramid_Getting_Started.pdf

WHO Tobacco Free Initiative http://www.who.int/tobacco/en/

Nutrition Australia

http://www.nutritionaustralia.org/national/resource/australian-dietary-guidelines-recommended-daily-intakes



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Conclusion

In order to be successful in quit smoking, medication is not the only means to help you. You need to have a strong motivation, know your high risk situations, be prepared to deal with stress and emotions without the help of cigarettes, and to develop a new life style to kick off the old habit. Also remember the 'golden rule': NEVER TAKE ANOTHER PUFF AGAIN. We are fully aware that you are getting ready to win this 'battle' and do not want to spend your hard-earned money to ruin your health. Our staff is ready to provide counselling support and medications. We hope this manual will help you to stop using tobacco and rediscover your own self. We wish you and your family can lead a smoke free and happy life in the future.



Smoke Free Live Free

Smoking Cessation and Relapse Prevention Manual

THIRD EDITION

Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation August 2018

ISBN: 978-988-78788-7-2

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